

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 03, 2009
Secretary of State

DOCUMENT# N05000009863

Entity Name: THE LINKS AT EMERALD DUNES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1201 US HIGHWAY ONE
STE 330
NORTH PALM BEACH, FL 33408**New Principal Place of Business:****Current Mailing Address:**1201 US HIGHWAY ONE
STE 330
NORTH PALM BEACH, FL 33408**New Mailing Address:****FEI Number:** 20-3548871**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KRIVOK, JAMES
1818 AUSTRALIAN AVE. S. STE. 400
WEST PALM BEACH, FL 334089 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: NUZZO, JEANNE
Address: 2914 HOPE VALLEY ST
City-St-Zip: WEST PALM BEACH, FL 33411**Title:** VD () Delete
Name: TOMLINSON, MARK
Address: 2920 HIDDNE HILLS RD
City-St-Zip: WEST PALM BEACH, FL 33441**Title:** STD () Delete
Name: CAMPBELL, CHRISTOPHER
Address: 2931 HOPE VALLEY ST
City-St-Zip: WEST PALM BEACH, FL 33411**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** STD (X) Change () Addition
Name: GROPPER, HARRIS
Address: 1274 BEACON CIRCLE
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEANNE NUZZO

PD

11/03/2009

Electronic Signature of Signing Officer or Director

Date